

ATTORNEY DOCKET NO. ACBI.028.01US

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	INTHE UNITED STATES PATE	NT AND TRADEMARK OFFICE
MATER S	ipplication of: Torleif Ove Bjornson a	et al.) Examiner: Not Yet Assigned
Serial	No.: 09/557,519) Art Unit: Not Yet Assigned
Filed:	April 25, 2000) <u>TRANSMITTAL</u>
Title:	Multiple array microfluidic device	units)
	ant Commissioner For Patents ington, D.C. 20231	
Sir:		
	Transmitted herewith along with the	
[X]	An executed Declaration and Power	
	[] A copy of the above-identifie	d application as originally filed.
[X]	Surcharge	
	[] For a large entity	\$130.00
	[X] For a small entity	\$ 65.00
	Total S	Surcharge \$ 65.00
[]	Additional claim fees:	.\$
[X]	Executed Assignments(s) for recorda	ation and the
	recording fee of \$40.00 per assignment	ent. \$ 40.00
		CERTIFICATE OF MAILING
		I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231 on Date 6/26/2000
		Signed Savil Naisla
		Printed David Vinchy

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[X]	Assignment Recordation Cover Sheet		
[]	An executed Verified Statement Claiming Small Entity Status.		
	[]	Applicant requests that a refund of one-half of the filing fee be credited to Deposit Account No. 18-0020 as the enclosed Verified Statement Claiming Small Entity Status is being filed within two months of the payment of the filing fee.	
Total	Fees:		\$105.00
[X]	A check including the amount of the above-indicated TOTAL FEES is attached.		
[]	Please charge Deposit Account No. 18-0020 in the amount of \$.		
[]	No fee is required.		
[X]	Conditional Petition for Extension of Time: An extension of time is requested in the prese		
and/or the above-referenced parent application to provide for timely filing if a			extension of
	time is still required after all papers filed with this transmittal have been considered		red.
[X] The Commissioner is hereb		ommissioner is hereby authorized to charge any underpayment of the follo	wing fees
	associated with this communication, including any necessary fees for extension of time credit any overpayment to Deposit Account No. 18-0020.		
	[X]	Any filing fees under 37 CFR 1.16 including fees for the presentation of	extra claims.
	[X]	Any parent application processing fees under 37 CFR 1.17.	•

A duplicate copy of this sheet is attached for accounting purposes.

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BRV/mfc

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